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|  | Председателю государственной экзаменационной комиссииСтавропольского края Смагиной М.В. |
| **ЗАЯВЛЕНИЕ** |
| **Я,** |

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| *фамилия* |

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| *Отчество* |

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| **Дата рождения:** |  |  | . |  |  | . |  |  |  |  |  |
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| **Пол** |  | мужской |  |  |  | женский |  |
| **Наименование документа, удостоверяющего личность: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  |
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| **Серия** |  |  |  |  |  | **Номер** |  |  |  |  |  |  |  |  |  |  |  |
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| **Отказываюсь** «\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_ 2024 года от сдачи единого государственного экзамена в рамках государственной итоговой аттестации по следующему общеобразовательному предмету \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, так как \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| В резервных днях \_\_\_\_ и \_\_\_\_ июня 2024 г. для сдачи ЕГЭ учебного предмета \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ не нуждаюсь. |

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| Подпись обучающегося \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ФИО) |
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| Подпись родителя (законного представителя) \_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ФИО) |
| «\_\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2024 г. |
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| Контактный телефон |

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